

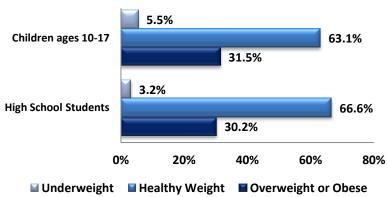
# **OVERWEIGHT AND OBESITY**



**OVERWEIGHT AND OBESITY** are terms for ranges of weight that are greater than what is generally considered healthy for a given height. The terms also identify weight ranges that have been shown to increase the risk for certain diseases and other health problems. In 2011, 31.5% of Indiana children ages 10–17 were

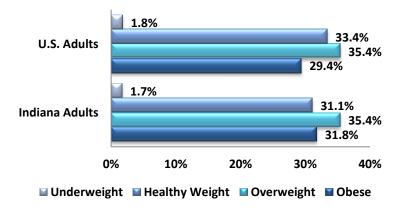
In 2011, 31.5% of Indiana children ages 10–17 were considered overweight or obese [Fig 1]. Among Indiana high school students, 30.2% were considered overweight or obese [Fig 1].

Figure 1. Percent of children ages 10-17 and high school students by weight status, Indiana, 2011<sup>1, 2</sup>



In 2013, 64.8% of U.S. adults<sup>†</sup> were considered either overweight or obese, as compared to 67.2% of Indiana adults<sup>†</sup> who were considered overweight or obese [Fig 2].<sup>3</sup> This amounts to over 3.3 million Hoosier adults, which is slightly more than the population of the state of Iowa.

Figure 2. Percent of adults<sup>†</sup> by weight status, Indiana and U.S., 2013<sup>3</sup>



# Calculating weight status: Body Mass Index (BMI)

- People's weight status is determined by using their weight and height to <u>calculate</u> their BMI.
- For most people, their BMI is closely related to the amount of body fat they have.
- Because children's body composition varies with age and sex, their BMI is determined using age- and sex-specific percentiles for BMI rather than the BMI categories used for adults.

# **Adult BMI categories**

- □ Underweight: Below 18.5
- □ Healthy Weight: 18.5–24.9
- □ Overweight: 25.0–29.9
- □ Obese: 30.0 and above

# **Child BMI categories**

- Underweight: Less than the 5<sup>th</sup> percentile
- Healthy Weight: 5<sup>th</sup> percentile to less than the 85<sup>th</sup> percentile
- Overweight: 85<sup>th</sup> percentile to less than the 95<sup>th</sup> percentile
- Obese: Greater than or equal to the 95<sup>th</sup> percentile

# Risk factors for becoming overweight or obese<sup>4</sup>

- Physical inactivity
- Unhealthy diet and eating habits
- Social and economic issues
- Family lifestyle
- Genetics
- Age
- Not breastfed as an infant<sup>5</sup>

# Health consequences of being overweight or obese<sup>6</sup>

- Hypertension (high blood pressure)
- High total cholesterol, low HDL cholesterol, and/or high levels of triglycerides
- Type 2 diabetes
- Coronary heart disease
- Stroke
- Gallbladder disease
- Osteoarthritis
- □ Sleep apnea and respiratory problems
- Some cancers (e.g., endometrial, breast and colon)

<sup>&</sup>lt;sup>T</sup>Adults are people ages 18 years and older



# **OVERWEIGHT AND OBESITY**



### **Economic consequences**

#### Indiana

- During an average year, Hoosiers pay \$3.5 billion in obesity-related medical costs.<sup>7</sup>
  - 36.9% of these costs are financed by the public sector through Medicare and Medicaid.<sup>7</sup>

#### **United States**

- In 2008, obesity-related health care costs were estimated at \$147 billion.<sup>8</sup>
  - This equals 9.1% of annual medical spending.
- ☐ If obesity rates remain level, there would be a \$550 million savings in medical expenses over the next two decades. 9
- □ If obesity rates continue to rise following current trends, total health care costs attributable to obesity and overweight will more than double every decade by 2030.9
  - This would equate to \$860 to \$956 billion or 15.6% to 17.6% of total health care costs.<sup>10</sup>

# TAKE ACTION: Steps you can take to prevent or manage being overweight or obese

- Maintain a proper diet and nutrition
  - Eat more <u>fruits</u> and <u>vegetables</u> and less high-fat, high-sugar, and high-sodium foods.
  - Drink more water and fewer sugary drinks.

# ■ Be physically active

- Adults should have 150 minutes of moderateintensity aerobic activity OR 75 minutes of vigorous-intensity aerobic activity each week.
- Children should have 60 minutes or more of moderate- or vigorous-intensity aerobic activity each day.
- Limit screen time (TV, computer and video games) for children to less than two hours per day.

# Support Breastfeeding

 It is recommended that new mothers breastfeed for at least 12 months.

#### Resources

- Calculate your or your child's BMI at: www.cdc.gov/healthyweight/assessing/bmi.
- To help families and communities understand physical activity and how it relates to maintaining a healthy weight, see these Physical Activity Tools and Resources.
- □ To learn about America's move to raise a healthier generation of kids, visit Let's Move.
- For information about how communities can promote active living and higher levels of physical activity, visit <u>Health</u> by Design.
- □ For resources on healthy eating and living—including recipes, nutritional information, and a food and activity tracker—visit Choose My Plate.
- To learn more about how to eat right and tips to stay on track, visit <u>Eat Right</u>.
- □ To help Hoosiers and their families eat better, move more, and avoid tobacco, visit INShape Indiana.
- □ For more information on what is being done in Indiana, visit the Indiana Healthy Weight Initiative website.

### References

- 1. Child and Adolescent Health Measurement Initiative (CAHMI). 2011-12 National Survey of Children's Health. Retrieved October 30, 2014, from: www.childhealthdata.org.
- 2. Indiana State Department of Health. (2012). Youth Risk Behavior Surveillance, 2011.
- 3. Indiana State Department of Health. (2013). Behavioral Risk Factor Surveillance System, 2012.
- 4. Mayo Clinic. (2012). Obesity Risk Factors, 2012.
- 5. Stuebe A. The risks of not breastfeeding for mothers and infants. Reviews in Obstetrics and Gynecology. 2009;2:222-231.
- 6. Raftery AK and Dwivedi PK. (2011). The Burden of Obesity in Indiana. Indiana State Department of Health.
- 7. Trogdon JG, Finkelstein EA, Feagan CW, Cohn JW. State- and Payer-Specific Estimates of Annual Medical Expenditures Attributable to Obesity. 0012;20(1):214-20.
- 8. Finkelstein J. Annual Medical Spending Attributable to Obesity: Payer- and Service-Specific Estimates. Health Affairs. 2009;28(5):w822-831.
- 9. Finkelstein EA, Khavjou OA, Thompson, H, Trogdon JG, Pan L, Sherry B, Dietz W. Obesity and Severe Obesity Forecasts through 2030. American Journal of Preventative Medicine. 2012;42(6):563-570.
- 10. Wang, Y., et al. (2008). Will Americans become overweight or obese? Estimating the progression and cost of the U.S. obesity epidemic. Obesity. 2008;16:2323-2330.